



DIV. III

MINISTRY OF HEALTH

850.0.28

No 1149/1

Borough of Haslingden.



ANNUAL REPORT

of the

Medical Officer of Health

for the Year ending
31st December, 1935.

L. A. Glover & Co., Printers, Haslingden.

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Members of the Health and Housing Committees.

— : : —

HIS WORSHIP THE MAYOR (ex-officio),
COUNCILLOR W. F. THACKER, J.P.

Councillor T. BROWN,
Chairman of the Health Committee.

Councillor W. BOYSON,
Chairman of the Housing Committee.

ALDERMEN :

A. E. BUTTERWORTH. L. GREENWOOD, J.P.
T. F. HAWORTH.

COUNCILLORS :

R. BOWKER.	F. BRANDWOOD, (Vice-Chairman of the Health Committee).
J. W. DEARDEN, C.C.	J. PLATT, (Vice-Chairman of the Housing Committee).
H. SKILLING.	F. SLATER.

GEORGE R. BULL, Town Clerk.

Public Health Officers of the Local Authority.

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Medical Officer of Health (part-time):

W. M. MARTIN, M.C., M.D., Ch.B., D.P.H., D.C.O.G.

Medical Officer for Maternity and Child Welfare
(part-time):—as above.

Laryngologist and Ophthalmic Surgeon (part-time):

P. A. HARRY, M.D., Ch.B., D.P.H.

Medical Consultant under Public Health

(Puerperal Fever and Puerperal Pyrexia) Regulations, 1926:

A. CALLAM, D.S.O., M.D., Ch.B., F.R.C.S.

Dental Surgeon (part time):

J. D. TURNER, L.D.S.

Veterinary Surgeon (as required):

H. B. ALLEN, M.R.C.V.S.

Senior Sanitary Inspector and Meat Inspector:

†* T. E. AMOS, A.R.San.I., M.S.I.A.

Assistant Sanitary Inspector:

* ARNOLD WARBURTON.

Public Health Clerks:

* REGINALD E. WARBURTON.

JOHN T. WOOD (temporary).

Lady Health Visitor:

Miss A. WHITELEY, S.R.N., S.C.M.

* Holders of Certificates of the Royal Sanitary Institute.

† Certified Meat and Food Inspector.

Borough of Haslingden.

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Public Health Offices,
Blackburn Road,
9th May, 1936.

To the Chairman and Members of the
Health Committee.

Mr. Chairman and Gentlemen,

I beg to submit the following report on the work of the Health Department for the Year ending 31st December, 1935. The report has been based on the requirements set out in the Ministry of Health Circular 1492, dated 18th October, 1935.

The year under review is an outstanding one in that during no other year has so much work been undertaken and completed by the Department. Much of the work done has been in connection with "Housing" and this matter is fully detailed in this Report. A considerable amount of work still remains to be done and it is hoped that the progress made during 1935 will be continued during 1936.

The provision of ante-natal and post-natal clinics is being held up by the absence of accommodation for this work, but developments in surrounding areas make it important that these clinics should be established as early as possible.

At the time of writing the Public Baths are nearing completion, and in view of the small number of dwelling-houses supplied with baths, it is hoped that full advantage will be taken of the facilities provided by the Local Authority.

I wish, once again, to express to you, Mr. Chairman, and to the Members of your Committee, my appreciation of your willingness at all time to discuss any matter affecting the general health of the inhabitants of the area.

To the Voluntary Workers who attend the Maternity and Child Welfare Centre, and without whose assistance the work in this Centre could not be carried out, I tender grateful thanks.

I thank the officials of the Borough, Mr. J. Arthur Rodwell, Engineer and Manager of the Irwell Valley Water Board, and my staff in the Health Department for their willing co-operation and assistance throughout the year.

I am,

Mr. Chairman and Gentlemen,

Your obedient Servant,

W. M. MARTIN,

Medical Officer of Health.

Section A

Statistics

and

Social Conditions

STATISTICS.

Area (in acres)	8,195
Population (Census, 1931)	16,639
Registrar-General's estimate of resident population, 1935	15,920
Number of inhabited houses (Census, 1931)	4,856
„ „ (End of 1935, according to Rate Books)	5,057
Rateable Value	£84,074
Sum represented by a penny rate	£327

		Total	Male	Female
Live Births	Legitimate ...	174	95	79
	Illegitimate ...	6	2	4
	Total	180	97	83

Birth Rate per 1000 of the estimated resident
population ... 11.3

		Total	Male	Female
Still Births		4	3	1
Rate per 1000 Total (live and still) births				21

		Total	Male	Female
Deaths		241	109	132

Death Rate per 1000 of the estimated resident
population ... 15.1*

Deaths from puerperal causes :—

	Deaths	Death Rate per 1000 Total (live and still) Births
Puerperal sepsis	—	Nil.
Other puerperal causes ...	1	5.43
	—	—
	1	5.43

Death Rate of Infants under 1 year :—

All infants per 1000 live births... ..	66
Legitimate infants per 1000 legitimate live births ...	68
Illegitimate infants per 1000 illegitimate live births	Nil.
Deaths from Measles (all ages)	Nil.
Deaths from Whooping Cough (all ages)	Nil.
Deaths from Diarrhoea (under 2 years of age)	Nil.

	Per 1000 of Estimated Population				Maternal Mortality Rate		
	Live Birth Rate	Death Rate	Death Rate from Tuberculosis of Respiratory System		Per 1000 Live Births	Per 1000 (Live & Still) Births	Rate of Deaths under 1 year per 1000 Live Births
			Death Rate from Cancer	Death Rate			
Mean of 5 yrs 1930-34	10.2	14.3	- 0.48	1.62	9.22	8.70	76
Year 1934	9.3	13.8	0.24	1.55	Nil	Nil	80
1935	11.3	*15.1	0.25	1.38	5.55	5.43	66

Increase or decrease in 1935 on—

5 yrs.' av'ge 1930-34	+1.1	+0.8	-0.23	-0.24	-3.67	-3.27	-10
Previous year ...	+2.0	+1.3	+0.01	-0.17	+5.5	+5.43	-14

*1935 adjusted death rate (comparability factor = 1.00)
= 15.1 per 1000

Population.

The Registrar-General's estimate of the mid-year population for 1935 shows a further decrease in the total population, which is now estimated as being 15,920. Table I shows the reduction in the estimated population during the past 10 years.

TABLE I.
POPULATION.

Year	Estimated Population	Population at Census
1901		18,543
1911		18,719
1921		17,486
1926	17,290	
1927	17,120	
1928	17,100	
1929	17,120	
1930	17,120	
1931	16,820	16,639
1932	16,560	
1933	16,280	
1934	16,060	
1935	15,920	

Births.

180 live births were registered during 1935, 97 being males and 83 females. This gives a Birth Rate of 11.3 per 1000 of the estimated resident population, as compared with a Birth Rate of 9.3 for the previous year and 10.2 for the 5 years' average, 1930-1934.

Table II shows the steady decline that has taken place in the number of births and the birth rate since 1891.

TABLE II.
NUMBER OF BIRTHS AND BIRTH RATE
PER 1000 ESTIMATED POPULATION.

Mean of 5 years	Number of Births	Birth Rate	Year	Number of Births	Birth Rate
1891-1895	2418	26.2	1927	209	12.2
1896-1900	2344	24.7	1928	195	11.3
1901-1905	1984	21.2	1929	181	10.5
1906-1910	1887	19.2	1930	172	10.0
1911-1915	1641	17.5	1931	189	11.2
1916-1920	1202	13.3	1932	176	10.6
1921-1925	1209	13.6	1933	160	9.8
1926-1930	975	11.3	1934	150	9.3
1931-1935	855	10.5	1935	180	11.3

Whilst the rate for 1935 has not been equalled since 1928, the birth rate is still low in comparison with the rest of the country. The provisional figures issued by the Registrar-General for 1935 show that the live birth rate per 1000 of the estimated population is as follows:—

	Live Birth Rate.
England and Wales	14.7
121 County Boroughs and Great Towns, including London	14.8
140 Smaller Towns (Resident Population 25,000 to 50,000 at Census 1931)	14.8
London	13.3
HASLINGDEN	11.3

There were 4 still births during 1935, this being equivalent to a still birth rate of 21 per 1000 total (i.e. live and still) births. The corresponding rate for previous years is shown in the following table.

TABLE III.
NUMBER OF STILL BIRTHS AND STILL BIRTH
RATE PER 1000 TOTAL (i.e. Live and Still) BIRTHS.

Year	Number of Still Births	Still Birth Rate
1930	11	60
1931	12	59
1932	16	83
1933	7	41
1934	10	62
1935	4	21

Deaths.

241 deaths were registered during the year, 109 males and 132 females. This gives a crude death rate of 15.1 per 1000 of the estimated resident population, an increase of 1.3 on the previous year and of 0.8 on the 5 years' average, 1930-1934. Table IV shows the fluctuations in the number of deaths and in the death rate during previous years for which we have records.

TABLE IV.

NUMBER OF DEATHS AND DEATH RATE PER
1000 ESTIMATED POPULATION.

Mean of 5 years	Number of Deaths	Death Rate	Year	Number of Deaths	Death Rate
1891-1895	1580	17.1	1927	259	15.1
1896-1900	1578	16.6	1928	206	12.0
1901-1905	1393	14.9	1929	276	16.1
1906-1910	1465	14.9	1930	217	12.6
1911-1915	1439	15.4	1931	247	14.6
1916-1920	1205	14.3	1932	249	15.0
1921-1925	1211	13.6	1933	255	15.6
1926-1930	1191	13.8	1934	223	13.8
1931-1935	1215	14.9	1935	241	15.1

Table V. shows the principal causes of death during
the 5 years, 1931-1935.

TABLE V.

PRINCIPAL CAUSES OF DEATH DURING 1935
AND THEIR VARIATION OVER 5 YEARS.

Causes of Death.	Year				
	1935	1934	1933	1932	1931
ALL CAUSES.	241	223	255	249	247
Measles ... ..	...	...	1	...	...
Scarlet fever... ..	...	...	...	...	1
Whooping cough ... ..	...	...	1	...	1
Diphtheria	1	...	...	...	...
Influenza	12	10	13	15	9
Encephalitis lethargica... ..	...	...	2	2	...
Cerebro-spinal fever	2	2	1	...	...
Tuberculosis of respiratory system	4	4	5	12	11
Other tuberculous diseases	1	...	3	1	3
Cancer, malignant disease	22	25	24	26	33
Diabetes	9	3	5	2	...
Cerebral hæmorrhage, etc.	15	9	26	30	13
Heart disease	77	58	53	56	63
Aneurysm... ..	1	...	1	...	...
Other circulatory diseases	15	14	11	10	5
Bronchitis	2	14	9	8	6
Pneumonia (all forms)	7	13	11	11	11
Other respiratory diseases ... ..	...	3	4	5	2
Peptic ulcer	2	1	3	4	4
Diarrhœa, etc. (under 2 years) ..	...	...	1	...	1
Appendicitis	1	1	2	2	1
Cirrhosis of liver ... ..	...	...	...	...	...
Other diseases of liver, etc.	3	...	3	4	4
Other digestive diseases	6	4	4	5	6
Acute and chronic nephritis	9	13	14	10	9
Puerperal sepsis... ..	...	...	1	1	...
Other puerperal causes	1	...	2	...	3
Congenital debility, premature birth, malformations, etc. ...	9	9	8	6	9
Senility	12	10	20	15	22
Suicide	3	5	2	6	4
Other violence	5	7	2	6	5
Other defined causes	22	18	21	12	21
Causes ill-defined or unknown ...	...	...	2	...	...

As in previous years, heart disease is again responsible for the greatest number of deaths, 77 persons having died from this disease, i.e. 31.9% or almost one-third of the total number of deaths. The number of deaths recorded as being due to cerebral haemorrhage is 15, whilst 15 deaths have been classified under the heading "other circulatory diseases." Deaths from influenza, bronchitis and pneumonia numbered 12, 2 and 7 respectively. Cancer and malignant disease accounted for 22 deaths, further particulars of which are given in Section F of this report.

The ages at death during 1935 are shown in Table VI.

TABLE VI.
AGES AT DEATH DURING 1935.

Age	Number of Deaths	Age	Number of Deaths	Age	Number of Deaths
Under 1	12	31-35	1	66-70	36
1-5	2	36-40	4	71-75	38
6-10	3	41-45	6	76-80	31
11-15	1	46-50	11	81-85	12
16-20	...	51-55	15	86-90	5
21-25	3	56-60	19	91-95	1
26-30	6	61-65	35	96-100	...

Infantile Mortality.

During 1935, twelve children died under the age of one year. This gives an infantile mortality rate (i.e. number of deaths under one year per 1000 live births) of 66. This

is a decrease of 14 on 1934 and a decrease of 10 on the 5 years' average, 1930-1934. Table VII compares the number of deaths of children under one year of age in 1935 with previous years, and also compares the infantile mortality rate.

TABLE VII.
NUMBER OF DEATHS UNDER ONE YEAR OF
AGE, AND INFANTILE MORTALITY RATE PER
1000 LIVE BIRTHS.

Mean of 5 years	Number of Deaths under One Year	Infantile Mortality Rate	Year	Number of Deaths under One Year	Infantile Mortality Rate
1891-1895	394	162	1927	16	76
1896-1900	400	170	1928	16	82
1901-1905	286	144	1929	21	115
1906-1910	252	133	1930	12	69
1911-1915	211	128	1931	18	95
1916-1920	103	85	1932	8	45
1921-1925	86	71	1933	15	93
1926-1930	82	84	1934	12	80
1931-1935	65	76	1935	12	66

The causes of infantile deaths during 1935 were as follows :—

Influenza	...	...	...	...	...	...	...	...	1
Pneumonia	...	...	...	...	...	...	...	...	1
Congenital debility, premature birth, malformations, etc.	...	...	...	...	...	...	...	...	9
Violence	...	...	...	...	...	...	...	...	1

and the ages at death are shown in Table VIII.

TABLE VIII.

INFANTILE MORTALITY—AGES AT DEATH.

Age	Number of Deaths	Age	Number of Deaths
—	1	12 days	1
11 hours	1	2 weeks	1
1 day	1	1 month	3
2 days	1	2 months	1
3 days	1	3 months	1

SOCIAL CONDITIONS.

The Borough of Haslingden is situated in an elevated position some 800 feet above sea level, and surrounded as it is by hills on every side it is not surprising that the climate should be a bracing one with a fairly heavy rainfall.

Haslingden is a Market town of fairly old associations—the first Parish Church dates back to 1284—and was one of the towns settled in by the pioneers of the cotton industry. As can be expected, a number of the houses falls short of modern requirements, many of them being old and of an unsuitable type, having been built to meet the housing demands of the people who first came to work in the cotton mills.

The population is chiefly of fairly well to do working people mostly employed as cotton operatives. Sandstone quarries, engineering and dairy farming give work to a number of people.

The humid atmosphere of the cotton mills has an adverse effect on the respiratory system, but apart from that there is no occupation specially injurious to public health.

As regards unemployment, it has been ascertained that at the end of the year approximately 9.1% of the insured population were wholly unemployed and 3.9% temporarily suspended. There has been no evidence of unemployment having had any serious detrimental effect upon the health of the inhabitants of the community.

Section B

General Provision

of

Health Services

Laboratory Facilities.

Throat swabs, specimens of blood, faeces, etc. are examined at the Public Health Laboratory, Manchester. Milk is sent to the same laboratory, whilst water is examined at the County Laboratory, Liverpool. Sputum is examined for the presence of tubercle bacilli by the Area Tuberculosis Officer at Accrington.

The Lancashire Insurance Committee have inaugurated a Laboratory Service at the Royal Albert Edward Hospital at Wigan, where there are all facilities for the examination of pathological material from patients who are insured under the National Health Insurance Acts.

Facilities are available for the laboratory diagnosis of venereal disease at the Venereal Disease Clinics at Bury, Blackburn and Burnley.

Ambulance Facilities.

The Bury and District Joint Hospital Board Motor Ambulance is used for the conveyance to hospital of cases of infectious disease, this Local Authority paying the cost of removal. Non-infectious, accident and maternity cases are conveyed to hospital by the Haslingden Corporation Motor Ambulance, which is also used for the conveyance of cases to and from Greenfield Massage and X-Ray Centre when necessary. During the year ending March 31st, 1936, the Haslingden Corporation Motor Ambulance removed 782 cases and travelled 12,545 miles.

The facilities available are adequate for the requirements of the Area.

Nursing in the Home.

General nursing in the Area is carried out by the Local Nursing Association, who employ three nurses. This Nursing Association does not undertake the nursing of maternity

cases, monthly nursing, or the nursing of cases of infectious disease, and is not assisted by the Local Authority.

No midwives are employed by the Local Authority. Five midwives are on the County Council Register and these midwives are all practising in the Area.

Clinics and Treatment Centres.

(a) Maternity and Child Welfare—

This Centre meets fortnightly, on alternate Thursdays, in the Methodist School, Manchester Road. The type of accommodation available is not satisfactory, but it is hoped that in the near future the building of a combined clinic and the establishment of an Ante-natal and Post-natal Department will greatly increase the efficiency of the work done.

(b) School Clinic—

This Clinic is held at the Central Council School, where the accommodation provided is quite inadequate. The services rendered here are very limited, as the one nurse employed by the Authority as Health Visitor and School Nurse can only give two mornings per week to the clinic.

(c) Orthopaedic Clinic—

Children suffering from orthopaedic defects are referred to the Orthopaedic Clinic at Rawtenstall. Further details regarding orthopaedic treatment are given in Section G of this Report.

(d) Actinotherapy Clinic—

Moorlands Public Assistance Institution provide facilities for artificial light treatment at Greenfield Massage and X-Ray Centre, where treatment can be carried out on the recom-

mendation of the Medical Practitioner concerned with the case.

(e) Tuberculosis Dispensary—

The Lancashire County Council have provided a Tuberculosis Dispensary at Accrington, where cases are referred to be seen by the Area Tuberculosis Officer. Radiographic facilities are available here, and the Tuberculosis Officer works in close co-operation with the Medical Practitioners in the Area.

Hospitals.

(a) Infectious Diseases—

Hospital accommodation for cases of infectious disease is provided at the Florence Nightingale Infectious Diseases Hospital, Bury. This is the hospital of the Bury and District Joint Hospital Board, with which this Authority has an agreement, but of which they are likely to become members in the near future. Cases are admitted on the recommendation of the Medical Officer of Health. The accommodation available is sufficient for our requirements.

(b) Non-infectious Cases—

Hospital accommodation is available for general medical, surgical and other non-infectious cases at the voluntary hospitals in Manchester, Bury, Blackburn and Accrington. The Local Authority does not contribute to any of the hospitals, but grants are made from a local Workpeople's Hospital Fund, which, though not officially controlled by the Council, has their goodwill and assistance, in that the Mayor for the time being is the President, and the recommendations to the various hospitals and to the Greenfield Massage and X-Ray Centre are issued by the Town Clerk's staff on the recommendation of the Medical Practitioner concerned.

(c) Maternity Cases—

Hospital accommodation is provided for maternity cases at the Maternity Department of Moorlands Public Assistance Institution, Rawtenstall, at the Maternity Department of Bury Infirmary and at St. Mary's Hospitals, Manchester.

(d) Greenfield Massage and X-Ray Centre—

This is a branch of the Moorlands Public Assistance Institution, is situated in Haslingden, and provides facilities for massage, electrical treatment and radiographic work. The work is under the control of the Medical Officer at Moorlands, who is assisted by a radiographer. Medical Practitioners in the Area may refer cases to the Centre, where they are seen by the Medical Officer. Payment is made direct to the Centre or recommendations for treatment and for radiograms can be obtained through the Workpeople's Hospital Fund on the recommendation of the Medical Practitioner concerned. The services provided are excellent and are made much use of by the inhabitants of the Area.

(e) Girls' Home, Pike Law—

This is a branch of the Moorlands Public Assistance Institution, homeless and destitute children being admitted temporarily, until other accommodation is found for them elsewhere.



Section C

Sanitary Circumstances

Water.

The water supply of Haslingden is obtained mainly from the Irwell Valley Water Board (late Bury and District Joint Water Board), partly from the Accrington and District Gas and Water Board and partly from springs and wells. Of the 5,057 inhabited houses on the rate books at the end of 1935, 4,371 or 86.4% are supplied by the Irwell Valley Water Board, 164 or 3.2% by the Accrington and District Gas and Water Board, and the remaining 522 houses or 10.4% of the total, obtain their supplies from springs and wells. All the water supplied by the Irwell Valley Water Board and by the Accrington and District Gas and Water Board is delivered direct to the consumer, neither of these authorities delivering water by stand-pipe.

Of the 5,057 houses in the area, only 1,351, or 26.7% are supplied with baths.

Many complaints have been received during the year regarding the water supplied by the Irwell Valley Water Board and since the Board are now taking action on the matter, it is perhaps opportune to discuss these complaints, and to state what action the Board has taken.

The complaints fall into two groups—

- (i) regarding the plumbo-solvent action of the water.
- (ii) regarding the colour and deposit occasionally found in the water.

(i) Plumbo-Solvency.

For some years now it has been known that cases of lead poisoning were occurring in the Area, and having ascertained that the cause lay in the water supply, steps were taken to deal with the matter. The attention of the Irwell Valley Water Board was drawn to these cases, and after consideration of the matter the Board applied to the

Ministry of Health for powers to install a water hardening plant at Scout Moor Reservoir. At the end of 1935 the installation of that plant was almost completed and at the time of writing it is in full commission. During the erection of this plant, temporary measures were taken to harden this water, and gave satisfactory results.

The water supplied by the Board is a soft acid moorland water, and such waters are known to have an action on lead. For some years now the Board have insisted on all service pipes being tin-lined, but they have no powers to insist on all existing service pipes being altered. The cases of lead poisoning have all been found in the older part of the town, where some service pipes are known to have been in existence for over 50 years.

Now that an efficient hardening plant has been installed, it is hoped that no further case of poisoning will arise.

(ii) Colour and Deposit.

It would appear that there are two causes for the water supplied to the consumer being periodically brown in colour and containing varying amounts of deposit:—

(a) During the alterations that have been taking place it has been necessary to cut off the water supply temporarily. This emptying of the mains gives rise to the breaking up of the iron oxide incrustation in the main, and when the supply is reinstated a considerable amount of fine suspended matter is usually present in the water. Although not inimical to health, consumers are advised to allow the sediment to settle before using the water for drinking purposes.

(b) It is inevitable that in mains that have been installed for a considerable number of years a fair amount of deposit should collect. Periodically these mains are

flushed out, and during the ensuing 24 hours this deposit will be found in the tap water. Regular flushing will probably reduce this annoyance considerably, but as long as the deposit is present, water for drinking purposes should be left standing until the deposit settles or, alternatively, should be filtered.

During 1935, of 20 samples of tap water submitted for analysis for the presence of lead, 13 showed evidence of serious contamination. Further examinations will be carried out during 1936 to ensure that the water hardening plant is having the effect for which it was erected.

Two samples of spring water, submitted for chemical analysis, gave satisfactory results.

Drainage and Sewerage.

The sewage disposal works are under the control of a Joint Board and the method of treatment is precipitation and filtration.

With the exception of a few outlying areas, the town is well served both by deep and surface water sewers. The work of inspection and repairs is done by the Borough Surveyor's Department.

There is still a number of houses not connected to public sewers, but these are mostly in outlying districts and farms.

Sanitary Accommodation.

Twelve pail closets were abolished during 1935, and there are still 245 pail closets in use. As stated in previous annual reports, these are scattered all over the Borough, and the work of conversion is being held up owing to the absence of suitable sewers, or the lack of town's water supply, in

many cases the head of water not being sufficient to feed the flushing cisterns of fresh-water closets. Where pail closets are abolished, fresh-water closets are substituted, the Council contributing half the cost.

The figures below show the closet accommodation of the Borough at the end of 1935 :—

Privy middens: No. of middens—8.

No. of closets attached to these middens—8.

No. of pail closets—245.

No. of fresh-water closets—1837.

No. of waste-water closets—2389.

No. of dry ashpits (excluding middens)—10.

No. of movable ashbins—4605.

Table IX below shows the particulars of conversions during 1935 and during the five years, 1930-1934.

TABLE IX.
CONVERSIONS.

	1935	Five Years 1930-1934
No. of privy closets { To fresh w.c's. To waste w.c's. To pails, etc.	2 Nil Nil	4 Nil Nil
No of pail closets { To fresh w.cs'. To waste w.c's.	9 Nil	156 Nil
No. of waste w.c's. to fresh w.c's.	4	3
No. of houses at which movable ashbins have been substituted for fixed receptacles	6	790

Public Cleansing.

At the beginning of the year there were 13 fixed ashpits in use. Three of these were abolished during the year, leaving 10 still in use at the end of the year. With the exception of these, all the Borough is now using portable galvanized iron ashbins which are emptied weekly by one of the two motor wagons employed by the Council.

The two refuse collection wagons have dealt with the following material:—

	No. of loads.
Ashbin refuse	3273
Ashpit refuse	28
Market refuse	105
Covering material for tip	4
Offal	53
Other material	14
Total	<hr/> 3477 <hr/>

In addition to the above, the two refuse wagons have collected all bedding for destruction and disinfection. Ten loads of refuse from privies and ashpits were removed by horse vehicle.

The whole of the town's refuse has been disposed of on the Controlled Tip at St. Peter's Avenue. The total amount of refuse and other material dealt with on this tip during the year is shown below:—

	No. of loads.
Loads tipped by refuse collection wagons	3476
Street sweepings, excavations, etc. from the Borough Surveyor's Department	804
Loads tipped by private traders, contractors, etc.	959
Total	<hr/> 5239 <hr/>

The system of Controlled tipping for the disposal of the town's refuse was first adopted by Haslingden in August, 1930, when the destructor was closed down, and has proved to be completely successful. The process is being carried out without nuisance and no complaints have arisen. Financially, the system has likewise proved successful, as the yearly expenditure for the disposal of refuse is now considerably less than what it used to be when the refuse was disposed of by incineration.

In September, 1935, a piece of land, where controlled tipping has been in progress since 1930, was handed over to the Parks Department and will be used as a playing field.

The unit costs of refuse collection and disposal for the year ended 31st March, 1935, are shown in the following table.

TABLE X.

REFUSE COLLECTION AND DISPOSAL.

Amount of refuse dealt with:

	Tons.
(a) Collection	3968
(b) Collection and Disposal	5470
Net cost per ton, including loan charges:	

	s.	d.
(a) Collection	7	11.6
(b) Disposal	1	11.5
Total	9	11.1

Net cost per 1000 population, including loan charges:

	£
(a) Collection	98.5
(b) Disposal	33.4
Total	131.9

Net cost per 1000 houses, including loan charges :

	£
(a) Collection	306.0
(b) Disposal	103.9
Total	409.9

Sanitary Inspection of the Area.

Details of the inspection work carried out during 1935 are shown in Table XI.

TABLE XI.
INSPECTIONS MADE DURING THE YEAR

Inspections under the Housing Acts	932
Meat and Food Inspections:—	
Slaughter-houses	623
Butchers' shops	138
Other food preparing places	55
Market	308
Farms	32
Merchandise Marks Acts	24
Public Health (Meat) Regulations	121
Milk samples	10
Common Lodging-houses	26
Houses let in lodgings	2
Infectious disease and disinfections	40
Factory and Workshop Inspections	35
Shops Act, 1934	24
Ashes receptacles	160
Drains and water closets	88
Places of public entertainment	7
Water supply	34
Rats and Mice (Destruction) Act	23
Work in progress	1138
Work completed	256
Smoke observations	16
Common yards, passages, etc.	452
Interviews	678
Other miscellaneous visits	875
Total	6097

In Table XII are given particulars of:—

- (a) Notices served and complied with;
- (b) Defects and nuisances found and remedied.

TABLE XII.

Notices.

	Served	Complied with
Formal Notices	73	38
Informal Notices	213	210

Nuisances and Defects.

	Discovered	Remedied
Dwelling-houses :		
Lighting and Ventilation	145	136
Food Store	178	64
Washing accommodation ...	37	24
Dampness	78	29
Absence of handrail	60	49
Water supply and taps	14	7
Yard paving	78	46
Yard divisional wall	4	9
Insanitary ashpit	7	9
Insufficient ashbins	16	...
Defective ashbins	118	132
Insanitary closet	34	12
Insufficient closet	18	7
Defective fresh-water closet ...	5	1
Defective waste-water closet..	38	77
Defective drains	35	19
Chimneys	28	25
Roofs	61	39
Eaves-gutters	131	81
Rain-water pipes	47	29
Fractured external wall	17	18

TABLE XII.—continued.

Nuisances and Defects.		
	Discovered	Remedied
Pointing	229	147
Overcrowding	3	1
Filthy premises... ..	1	1
Fractured internal wall	25	6
Defective plaster	355	234
Ceiling not underdrawn	11	21
Defective sink and sink- waste pipe	82	57
„ fire-ranges	163	111
„ stairs	50	31
„ windows	450	311
„ doors, frames	92	61
„ floors	243	217
Others	157	53
Animals and poultry kept as to be a nuisance	1	—
Offensive accumulations	3	3
Factories and Workshops:		
Nuisances	9	9
Dairies and Cowsheds:		
Floors	1	1
Drainage... ..	1	1
Totals... ..	3025	2078

In addition to the above, 2196 defects were noted during the inspection of houses in Clearance Areas.

Shops.

Twenty-four inspections were made during the year in accordance with the provisions of the Shops Act, 1934, but no action was found to be necessary.

Smoke Abatement.

Sixteen half-hourly observations were taken of mill chimneys and in nine of these the emission of smoke exceeded the time limit of two minutes per half-hour. Black smoke was emitted for a total of 50.5 minutes, an average of 3.1 minutes per observation.

Swimming Baths and Pools.

Public Swimming Baths were in the course of erection at the end of 1935.

Offensive Trades.

The number of offensive trades within the Borough is two, viz:—a soap works and a tripe boiler. Fish and chip shops have not been placed under any regulations, but these premises receive periodic inspections.

Factory and Workshop Act.

Thirty-five visits have been paid to workshops, etc. The following is a list of the workshops in the Borough:—

Bakers and Confectioners	...	...	...	...	...	...	...	...	...	30
Boot and Shoe Repairers	...	...	...	...	...	...	...	...	...	12
Dressmakers and Milliners	...	...	...	...	...	...	...	...	...	9
Joiners and Cabinet Makers	...	...	...	...	...	...	...	...	...	4
Tailors	...	...	...	...	...	...	...	...	...	4
Blacksmiths	...	...	...	...	...	...	...	...	...	3
Printer	...	...	...	...	...	...	...	...	...	1
Saddler	...	...	...	...	...	...	...	...	...	1
Tinsmiths	...	...	...	...	...	...	...	...	...	3
Total										67

TABLE XIII.

FACTORIES, WORKSHOPS AND WORKPLACES.

1. Inspection of Factories, Workshops and Workplaces.

Premises	Number of Inspections	Number of Written Notices
Factories (Including Factory Laundries)	12	4
Workshops (Including Workshop Laundries)	23	2
Workplaces (Other than Out- workers' premises) ...	—	—
Total	35	6

2. Defects found in Factories, Workshops and
Workplaces.

Particulars	Number of Defects	
	Found	Remedied
Nuisances under the Public Health Acts:—		
Want of cleanliness ...	2	2
Other nuisances ...	3	3
Sanitary Accommodation:—		
insufficient ...	2	2
unsuitable or defective	2	2
Total	9	9

Common Lodging-Houses, etc.

There are four common lodging-houses registered in the Borough, all of which are situate in Town Ward.

In addition to the above, there are a number of houses let in lodgings, which are periodically visited to see that the Bye-Laws are being observed.

Rag Flock Acts, 1911 and 1928.

There are no premises in the town where rag flock is manufactured, and so far as is known none is being used or sold.

Schools.

The sanitary condition of each school is commented upon by the School Medical Officer in each of his monthly school visits. The sanitary condition and the water supply are satisfactory.



Section D

Housing

(a) Housing Conditions.

Most of the houses in the Borough are stone built of the through 3-bedroom type. In previous Annual Reports it has been noted that repairs and alterations to many houses in the area were necessary to bring them up to any modern standard of housing. This matter is now receiving attention, but there is still a great deal of work to be done before one can be satisfied that the inhabitants are living in healthy homes.

There is no serious shortage of houses in the Borough, but there is a great and constant demand for small houses, built on modern lines and suitable for working people. Houses built by the Local Authority are constantly being asked for, principally, I think, because the people are realising how much more healthy they are than the old type of house in which they are now living.

From observations made during the year and confirmed by the overcrowding survey undertaken in the early part of 1936, it can be stated that there is very little overcrowding in the Borough. On two occasions during 1935, overcrowding was abated as the result of service of notice under section 91 of the Public Health Act, 1875. As far as the new legislation is concerned, certain cases of overcrowding, when viewed from the aspect of separation of the sexes, are not going to be abated, for the reason that living-rooms, calculated as being available for sleeping purposes, will not in fact be used for that purpose. Living rooms in this Area are only used as bedrooms when there is illness in the house, and we have no power to insist that they shall be used as bedrooms to enable proper segregation of the sexes.

(b) Slum Clearance.

As a result of the issue by the Ministry of Health in April, 1933, of Circular 1331, a programme of slum clearance was

drawn up which it was proposed to carry out during the five years, 1934-1938. The programme originally included 9 Clearance Areas, comprising 172 houses, but has since been modified and at the end of 1935 included 9 Clearance Areas, comprising 189 houses.

Details of the progress made under this programme and the position at the end of 1935 are shown below:—

Official Representations Made and Accepted:

(a) Prior to 1935	...	...	4	(4 Areas—94 houses)
(b) During 1935	...	...	3	(3 Areas—58 houses)
			—	
Total	...	...	7	(7 Areas—152 houses)
			—	

Clearance Orders Confirmed:

(a) Prior to 1935	...	...	2	(2 Areas—52 houses)
(b) During 1935	...	...	—
			—	
Total	...	...	2	(2 Areas—52 houses)
			—	

Houses Demolished:

(a) Prior to 1935	...	...	—
(b) During 1935	...	...	32	(111 persons displaced)
			—	
Total	...	...	32	(111 persons displaced)
			—	

New Houses Erected to Re-house Displaced Persons:

(a) Prior to 1935	...	...	—
(b) During 1935	...	...	40	
			—	
Total	...	...	40	
			—	

In addition to the above, 3 insanitary houses were demolished during 1935, in anticipation of formal procedure under section 19 of the Housing Act, 1930; and two insanitary houses were closed, but not demolished, on an undertaking of the owner under section 19.

On account of the fact that Haslingden, like many other towns in North-east Lancashire, is built on a hill side, many houses are built into the hill side and so become "back-to-earth" houses. There are some 118 of these houses and the problem as to what can be done with them has so far defied solution. A large number of these back-to-earth houses are found on the main road running through the town. The general condition of many of them is good, but their method of construction renders it impossible to alter them. At the moment, no method as to how these houses can be dealt with has been forthcoming. In addition to these houses, there are some 290 back-to-back houses in the Borough.

(c) Reconditioning Insanitary Property.

Another matter which is deservedly claiming much attention of the Department at the present time is the reconditioning of insanitary property. The desirability of providing each and every member of the community with a suitable habitation, equipped with modern amenities and kept in good repair, has long been recognised, and it is partly with this end in view that much of the Housing legislation of recent times has been framed.

During 1935, 65 informal notices and 60 formal notices under section 17 of the Housing Act, 1930, were served. In every case an extensive list of repairs was called for, and in addition there were often several improvements required and deficiencies to be remedied. Amongst others, these have included the provision of ventilated food storage accommodation, the provision of washing accommodation, improved facilities for lighting and ventilation and the provision of separate refuse and sanitary accommodation.

Repairs and alterations have been satisfactorily completed during the year at 86 houses, 50 as the result of informal notice and 36 as the result of formal notice under section 17 of the Housing Act, 1930.

(d) Statistics.

Number of new houses erected during the Year:—

(a) Total (including numbers given separately under (b)) ...	74
(i) By the Local Authority	40
(ii) By other Local Authorities	Nil
(iii) By other bodies or persons	34
(b) With State assistance under the Housing Acts:	
(i) By the Local Authority	40
(ii) By other bodies or persons	Nil

1. Inspection of Dwelling-houses during the Year:—

(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	176
(b) Number of inspections made for the purpose	932
(2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	171 ✓
(b) Number of inspections made for the purpose	922
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	69
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	103

2. Remedy of Defects during the Year without
Service of formal Notices:—

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	50
--	----

3. Action under Statutory Powers during the Year:—

A.—Proceedings under sections 17, 18 and 23 of the
Housing Act, 1930:

- | | |
|---|-----|
| (1) Number of dwelling-houses in respect of which
notices were served requiring repairs | 60 |
| (2) Number of dwelling-houses which were rendered
fit after service of formal notice:— | |
| (a) By owners | 36 |
| (b) By Local Authority in default of owners .. | Nil |

B.—Proceedings under Public Health Acts:

- | | |
|---|-----|
| (1) Number of dwelling-houses in respect of which
notices were served requiring defects to be
remedied | Nil |
| (2) Number of dwelling-houses in which defects were
remedied after service of formal notices:— | |
| (a) By owners | Nil |
| (b) By Local Authority in default of owners ... | Nil |

C.—Proceedings under sections 19 and 21 of the
Housing Act, 1930:

- | | |
|---|-----|
| (1) Number of dwelling-houses in respect of which
Demolition Orders were made | 1 |
| (2) Number of dwelling-houses demolished in pur-
suance of Demolition Orders | Nil |

D.—Proceedings under section 20 of the Housing
Act, 1930:

- | | |
|---|-----|
| (1) Number of separate tenements or underground
rooms in respect of which Closing Orders were
made | Nil |
| (2) Number of separate tenements or underground
rooms in respect of which Closing Orders were
determined, the tenement or room having been
rendered fit | Nil |

Section E

**Inspection and Supervision
of Food**

Milk Supply.

The number of cowkeepers on the register at the end of the year was 115, of which 74 have their premises registered as dairy farms. In the majority of these cases the milk is sold by retail, either from the open kit or in bottles.

Many of these farms are situated in outlying areas of the district and difficulty is experienced in paying an adequate number of visits. Every attempt is being made, however, to make as many inspections per year as possible. During 1935, 32 such inspections were made. As stated in previous Annual Reports, much work is necessary to bring the farm premises up to the standard required by the Milk and Dairies Order, 1926, but I am pleased to report that the improvements made are being maintained. During 1935, structural alterations have been carried out at 2 dairy farms, embracing improvements to floors, drainage, standings and water supply.

In addition to the farms enumerated above, there are 41 dairymen and retail purveyors of milk on the register, other than cowkeepers. Most of these are tradesmen, who sell milk in bottles and whose premises are periodically inspected.

The number of registrations as at the end of 1935 are shown below :—

Cowkeepers, dairymen and retail purveyors	68
Cowkeepers, dairymen, wholesale producers and wholesale traders	4
Cowkeepers, dairymen, wholesale producers, whole- sale traders and retail purveyors	2
Dairymen and retail purveyors	2
Retail purveyors	38
Wholesale trader	1
	<hr/>
	115
	<hr/>

Milk (Special Designations) Order, 1923.

One farm in the Borough produces Certified Milk. Two dealers' licences in respect of Certified milk are issued by this Local Authority.

Examination of Milk Supplies.

(a) Bacterial Count, B. Coli, etc.:

The following table gives the results of the examination of 8 samples of milk.

TABLE XIV.

BACTERIOLOGICAL EXAMINATIONS OF MILK.

Sample Number	Bacteria per c.c. (Growing at 37° C. in 48 hours.	Bacillus Coli in		
		1.0 c.c	0.1 c.c.	0.01 c.c.
10843	10,250	absent	absent	absent
10844	3,400	„	„	„
10841	14,900	„	„	„
10842	4,390	present	„	„
12021	35,500	„	present	present
12024	380,000	„	„	„
12022	295,000	„	„	„
12023	150,000	„	„	„

(b) Tubercle Bacilli:

Two samples of milk were submitted to the Bacteriologist for examination for the presence of tubercle bacilli. The result was negative in both cases.

Tuberculosis Order, 1925.

The Veterinary Surgeon was called in on three occasions to make inspections under the Tuberculosis Order, 1925. The number of animals examined was as follows:—

Cows in milk	...	...	...	...	...	...	...	...	60
Other cows or heifers	...	...	...	...	...	...	...	...	29
Other bovine animals	...	...	...	...	...	...	...	...	17
Total									106

Three animals were slaughtered under the Order and the following Table XV shows the reason for slaughter and the result of the post mortem examination in each case.

TABLE XV.
SLAUGHTER OF ANIMALS UNDER THE
TUBERCULOSIS ORDER, 1925.

Description of Animal	Reason for Slaughter	Result of Post Mortem Examination
Cow in milk	Tuberculous emaciation	Tuberculous emaciation (Advanced)
Cow in milk	Giving Tuberculous milk	Giving Tuberculous Milk and showing lesions of tuberculosis (Not advanced)
Other Cow	Tuberculous emaciation	Tuberculous emaciation (Advanced)

Slaughter-Houses.

No public abattoir has been provided within the Borough, there being 10 privately owned licensed slaughter-houses, which are regularly visited and inspected. Many of these are far from being satisfactory, and for a number of years now it has been stated in the Medical Officer of Health's Annual Report, that one of the chief sanitary requirements of the district was a Public Abattoir.

Slaughter of Animals Act, 1933.

At the end of the year 46 licences to slaughter animals were in operation.

Inspection of Meat and Other Foods.

As far as possible all meat is examined at the time of slaughter, the only difficulty being in covering the large area over which the slaughter-houses are distributed, much of the slaughtering by the different butchers being done simultaneously.

Visits are paid periodically to shops and all premises where foodstuffs are stored or are in the course of preparation. The Market is visited each Market Day, i.e. Tuesday and Saturday. The number of visits paid during the year for the purpose of meat and food inspection was 1301, made up as follows:—

Slaughter-houses	...	...	...	...	...	...	...	...	623
Butchers' shops	...	...	...	...	...	...	...	...	138
Other food preparing places	...	...	...	...	...	...	...	...	55
Market	...	...	...	...	...	...	...	...	308
Farms	...	...	...	...	...	...	...	...	32
Merchandise Marks Acts	...	...	...	...	...	...	...	...	24
Public Health (Meat) Regulations	...	...	...	...	...	...	...	...	121
									<hr/> 1301 <hr/>

The number of animals inspected was 4054, made up as follows:—

Bullocks	...	...	...	...	...	...	...	...	456
Cows	...	...	...	...	...	...	...	...	5
Heifers	...	...	...	...	...	...	...	...	106
Calves	...	...	...	...	...	...	...	...	17
Sheep	...	...	...	...	...	...	...	...	3008
Pigs	...	...	...	...	...	...	...	...	462
									<hr/> 4054 <hr/>

Details of the meat condemned during 1935 are shown in Table XVI.

TABLE XVI.
MEAT CONDEMNED AS BEING DISEASED OR UNSOUND.

Disease or Condition	Diaphragms	Heads	Lungs	Hearts	Livers	Stomachs	Intestines	Kidneys	Carcass meat, Wt. in lbs.	Carcases	Total Weight in lbs.
Tuberculosis ...	3	24	19	4	14	1	13	10	1700	2 Bull- ocks 1 Heifer	2616
Fluke ...	...	...	...	...	49	...	...	...	...	...	385
Cirrhosis ...	...	...	...	...	33	...	...	...	...	...	287
Abscesses ...	6	1	8	5	15	5	3	...	340	...	714
Metritis ...	...	...	...	...	...	...	...	...	120	1 Pig	120
Pericarditis ...	...	...	...	7	...	...	...	...	...	...	12
Pneumonia ...	...	...	3	...	...	...	...	...	...	...	18
Congestion ...	...	...	6	3	10	...	...	...	...	...	90
Melanosis ...	...	...	1	...	1	...	...	...	...	...	19
Rachitis ...	...	...	...	...	...	...	...	...	186	1 Pig	186
Parasitic ...	...	...	...	...	180	...	...	...	...	...	333
Bruised ...	...	...	...	...	...	...	...	...	6	...	6
Unsound ...	1	...	3	2	3	...	...	...	197	3 Pigs	227
Total ...	10	25	40	21	305	6	16	10	2549	2 Bull- ocks 1 Heifer 5 Pigs	5013

In addition to the above, 76 lbs. of fish and 2 cwt. of raw sausage casings were condemned as being unsound.

Public Health (Shell-Fish) Regulations, 1934.

One sample of mussels, submitted for bacteriological examination proved to be only 20% clean. Further supplies of mussels from the same source were discontinued for the time being, and a copy of the bacteriologist's report forwarded to the Medical Officer of Health in whose district the laying was situated.

Bakehouses.

There are 30 bakehouses on the register, most of them being at small confectionery businesses, where baking is done in the living-room. There are still four underground bakehouses on the register.

Adulteration, Chemical and Bacteriological Examination of Food.

The administration of the Food and Drugs (Adulteration) Act, 1928, and other Food Orders and Regulations, is under the control of the Lancashire County Council in this Area, the police taking all the required samples.



Section F

**Prevalence of,
and Control over,
Infectious and other Diseases**

TABLE XVII.

NOTIFICATIONS OF INFECTIOUS DISEASES (other than Tuberculosis) RECEIVED DURING
THE YEAR 1935.

“Notifiable” Diseases	Total Cases Notified													Total Deaths	Hospital	
	Total Cases at all Ages	Years													Total cases removed to Hospital from district	Deaths in Hospital of persons belonging to district
		Un-der 1	1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65	65 and over			
Scarlet fever ...	25	...	1	3	1	3	4	...	3	...	...	...	2	...
Diphtheria (including membranous croup) ...	5	...	...	1	1	...	2	...	1	...	...	...	4	1
Acute primary and acute influenzal pneumonia ...	29	1	2	1	...	1	2	3	3	2	2	8	...	...
Puerperal pyrexia ...	2	...	...	...	...	...	...	...	1	...	...	...	1	...
Cerebro-spinal fever ...	4	2	1	...	...	1	...	...	...	...	...	...	2	2
Ophthalmia neonatorum ...	2	2	...	...	...	...	...	...	...	...	...	...	...	...
Erysipelas ...	5	...	...	...	...	...	...	...	1	...	3	1	1	1
Totals	72	5	3	2	4	3	16	9	3	8	3	11	9	3		
														10		

TABLE XIX.

TOTAL NUMBER OF CASES OF INFECTIOUS DISEASES (other than Tuberculosis) NOTIFIED
DURING THE TEN YEARS, 1926-1935.

	Total Cases Notified.									
	Year									
	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935
"Notifiable" Diseases										
Smallpox ...	...	3	2	...	...	...	...	...	...	25
Scarlet fever	41	63	19	34	25	31	11	27	33	5
Diphtheria (including membranous croup)	4	14	6	8	...	11	7	13	3	...
Enteric fever (including paratyphoid) ...	2	1	1	...	2	31	...	1	...	...
Acute primary and acute influenza pneumonia	20	33	18	30	18	...	19	45	35	29
Puerperal fever ...	...	1	1	...	1	...	...	...	...	...
Puerperal pyrexia ...	...	...	...	...	2	...	2	1	1	2
Cerebro-spinal fever	...	...	...	...	...	...	...	1	1	4
Acute poliomyelitis	...	...	...	...	1	...	...	...	4	...
Encephalitis lethargica	...	1	1	2	2	...	1	1	...	...
Ophthalmia neonatorum	4	1	3	2	4	2	4	1	2	2
Erysipelas ...	2	3	5	5	7	5	3	16	6	5
Malaria	1	...	...	...	...	...	...	...	...	...
Totals...	74	120	56	81	62	80	47	106	85	72

General Observations.

There has been no serious epidemic or excessive incidence of any infectious disease during the year. 72 notifications of infectious disease, other than tuberculosis, were received from Medical Practitioners, and the occurrence of 285 cases of non-notifiable infectious disease was brought to my notice by school teachers.

Each case of notifiable infectious disease is visited by the Sanitary Officer as soon as possible after receipt of notification, and a report thereon submitted to the Medical Officer of Health.

Scarlet Fever.

25 cases of scarlet fever were notified during 1935, but the disease never reached epidemic proportions. In every case the disease was of an exceptionally mild character, and no deaths occurred. Two of the patients were removed to hospital, and 23 treated at home. No "return" cases were discovered, and no action has been necessary to shorten the stay of uncomplicated cases in hospital.

No use has been made of the Dick test or of artificial immunization against scarlet fever.

Diphtheria.

Five notifications of diphtheria were received, and of these one was treated at home and four in hospital. None of these cases had been immunized. One death occurred in hospital.

For the early treatment of diphtheria, a supply of anti-toxin is kept at the Public Health Offices, from where it is obtainable by Medical Practitioners on application.

Immunization against Diphtheria.

During 1933, a commencement was made with a scheme for immunization against diphtheria. It was decided, where parental permission could be obtained, to inoculate as many children as possible over the age of one year. Arrangements were made, where the parents desired it, for the inoculations to be given by their private Medical Practitioner, the inoculating material to be supplied free to the practitioner concerned on condition that

- (i) the three injections be given at the proper intervals ;
- (ii) a postcard, containing details of the amounts given, the dates of the inoculations, the child's name and the name of the school attended, be completed by the practitioner concerned, and returned to the Medical Officer of Health on completion of the inoculations ;
- (iii) all steps be taken to encourage the child to attend at the School Clinic for Schick testing three months after the last inoculation.

It was thought advisable to leave the Schick testing in the hands of the Medical Officer of Health in order to avoid confusion in the reading of the results.

It was also decided, on completion of the Schick readings, to issue certificates of immunization to each child showing a negative reaction, i.e. believed to be immune to diphtheria.

To initiate the scheme in each school, a circular was issued to each child to be taken to the parents, the reverse side of the circular containing a form for the parent to sign if he was willing for the procedure to be carried out.

Particulars of the inoculations carried out during 1935 are shown in Table XX.

TABLE XX.
IMMUNIZATION AGAINST DIPHTHERIA.

Name of School, etc.	No. of Inoculations			Number of Children Immunized by one Inoculation only	Number of sick Tests	
	1st	2nd	3rd		Positive	Negative
Central Council	23	...	126
Church of England	5	...	...
St. Mary's R.C.	11	...	...
Helmshore Council	11	...	26
Stonefold	11
Baxenden Methodist	13
Ewood Bridge	1
Maternity and Child Welfare (children under school age)
Inoculations given by Private Medical Practitioners	2	2	2	...	...	...
Total	2	2	2	50	...	177

The total number of inoculations since the inception of the scheme in 1933 is given in Table XXI.

TABLE XXI.
IMMUNIZATION AGAINST DIPHTHERIA.

Year	Number of Inoculations			Number of Children Immunized by one Inoculation only	Number of Schick Tests	
	1st	2nd	3rd		Positive	Negative
1933	620	599	585	...	...	...
1934	401	406	393	62	5	641
1935	2	2	2	50	...	177
Total	1023	1007	980	112	5	818

Pneumonia.

Twenty-nine notifications of acute primary and acute influenzal pneumonia were received, and the number of deaths from all forms of this disease was seven.

Puerperal Fever and Puerperal Pyrexia.

There were no cases of puerperal fever and only two of puerperal pyrexia, one of which was removed to hospital. No deaths occurred during the year from puerperal sepsis. Further details regarding these diseases are given in Section G. of this report.

Cerebro-Spinal Fever.

Four cases of cerebro-spinal meningitis were notified, two of which were treated in hospital. Two deaths occurred in hospital from this disease.

Ophthalmia Neonatorum.

Two cases of ophthalmia neonatorum occurred during the year, further details of which are given in Section G. of this report.

Erysipelas.

Five cases of erysipelas were notified, all of which were treated at home.

Non-Notifiable Infectious Disease.

Cases of non-notifiable infectious disease, occurring amongst the school population, are notified to the Medical Officer of Health by school teachers. During 1935, 285 such notifications were received, these being:—

Measles	...	...	...	...	...	3
Chickenpox	...	...	...	...	...	186
Whooping-cough	...	...	...	...	...	2
Mumps	...	...	...	...	...	94
Total						285

The following Table XXII shows the monthly incidence of non-notifiable infectious diseases which occurred amongst school children during 1935.

TABLE XXII.

MONTHLY INCIDENCE OF NON-NOTIFIABLE
INFECTIOUS DISEASES DURING THE YEAR
1935.

Month	"Non-notifiable" Diseases				
	Measles	Chicken-pox	Whooping Cough	Mumps	Total
January ...	...	...	...	...	...
February ...	...	2	...	...	2
March ...	...	18	...	...	18
April ...	...	111	...	...	111
May ...	1	9	...	...	10
June ...	2	...	...	...	2
July ...	...	...	...	...	...
August ...	...	1	...	...	1
September ...	...	...	...	13	13
October ...	...	26	...	24	50
November ...	...	12	2	36	50
December ...	...	7	...	21	28
Totals ...	3	186	2	94	285

Influenza.

There has been no serious epidemic of influenza during the year. Twelve deaths were certified as being due to this disease.

Infectious Disease in Schools.

All cases of infectious disease, whether notifiable or non-notifiable, occurring amongst school children are reported by school teachers. All such cases and their contacts are excluded from school at the discretion of the Medical Officer of Health, who is also School Medical Officer.

At no time during 1935 was it found necessary to close a school, or a department of a school, on account of an infectious disease.

Hospital Treatment.

By an arrangement with the Bury and District Joint Hospital Board, accommodation is available at the Florence Nightingale Hospital, Bury, for cases of smallpox and other infectious diseases. A retaining fee is paid to the Board, and patients are not required to contribute to the cost of treatment. Beds are available as required, and the accommodation has always been sufficient to meet our requirements.

A case is only admitted to the hospital on the recommendation of the Medical Officer of Health, after he has considered the report submitted to him by the Sanitary Inspector, or alternatively, after any investigation he may have made himself at the request of the Medical Practitioner concerned. Only where necessary is a case removed to hospital, e.g. in the case of severe illness or the absence of facilities for isolation.

A new decision was reached during 1933 with regard to cases of measles, which are now removed to hospital if the conditions warrant it. Cases of whooping-cough are not removed to hospital.

The following Table XXIII shows the number of cases of infectious disease treated in hospital during 1935

TABLE XXIII.

**CASES OF INFECTIOUS DISEASE TREATED IN
HOSPITAL DURING 1935.**

Cases	Total	Disease			
		Diph- theria	Scarlet fever	Puer- peral Pyrexia	Cerebro- spinal fever
In hospital at be- ginning of year	...	...	...	...	...
Admitted during the year ...	9	4	2	1	2
Discharged during the year ...	2	...	2	...	...
Died in Hospital	3	1	...	...	2
Remaining in hos- pital at the end of of the year	4	3	...	1	...

Three deaths occurred in hospital during the year.

Bacteriological and Pathological Examinations.

Twelve throat swabs were examined at the Public Health Laboratory, Manchester, for the presence of *C. Diphtheriæ*. The result was positive in two cases. Two specimens, one of blood and one of fæces and urine, from suspected cases of enteric fever were found to be negative.

The examination of sputum for the presence of tubercle bacilli is carried out at the Tuberculosis Dispensary, Accrington, under the supervision of Dr. B. MacPhee, Consultant Tuberculosis Officer to the Lancashire County Council. Of 34 such specimens examined during 1935, 9 were positive and 25 negative.

Public Health (Smallpox Prevention) Regulations, 1927.

No primary or re-vaccinations were performed during the year by the Medical Officer of Health.

Supply of Vaccines or Sera.

Propnylactic toxoid, for the immunization of children against diphtheria, is supplied free to Medical Practitioners under certain conditions, further particulars of which are given in this Section of the report under the heading "Immunization Against Diphtheria."

Anti-diphtheritic serum is also supplied to Medical Practitioners.

Cancer, Malignant Disease.

Twenty-two deaths occurred during the year, 8 males and 14 females. Further details of these, as to age at death and organs affected, will be found in Table XXIV.

TABLE XXIV.
CANCER, MALIGNANT DISEASE.

Organ or Part Affected	Males		Females	
	No. of Deaths	Ages at Death	No. of Deaths	Ages at Death
Digestive organs and peritoneum ...	5	56, 62, 64, 66, 69.	11	47, 47, 53, 54, 56, 61, 67, 70, 73, 79, 82.
Respiratory organs ...	3	59, 62, 78.	...	...
Uterus ...	...	...	1	64
Other female genital organs ...	...	...	1	58
Skin ...	...	...	1	69

The above list has been compiled in accordance with the Manual of the International List of Causes of Death.

Tuberculosis.

Each case of tuberculosis is visited by Nurse Norwood of the Lancashire County Council Tuberculosis Dispensary as soon as practicable after receipt of notification. 66 cases were visited during 1935, the number of visits paid being 220. Where desirable, sanatorium or hospital treatment is arranged for after consultation between the Tuberculosis Officer and the Medical Practitioner concerned. Cases are followed up wherever possible.

At the beginning of the year there were 77 cases of tuberculosis on the register ; 18 cases were added and 16 cases were taken off the register, leaving a total of 79 cases at the end of the year. The following Table XXV gives an analysis of the cases on the register during the year.

TABLE XXV.

PARTICULARS OF CASES OF TUBERCULOSIS ON THE REGISTER DURING 1935.

	Pulmonary			Non-Pulmonary			Total Pulmonary and Non-Pulmonary		
	Males	Females	Total	Males	Females	Total	Males	Females	Total
Number of Cases of tuberculosis on the Register at the commencement of the year. ...	14	8	22	26	29	55	40	37	77
Number of Cases added to the register during the year	6	6	12	4	2	6	10	8	18
Number of Cases of tuberculosis removed from the register during the year on account of:									
(a) having died	1	3	4	2	...	2	3	3	6
(b) having left the district	4	...	4	1	...	1	5	...	5
(c) having recovered ... ..	...	...	...	2	1	3	2	1	3
(d) diagnosis of tuberculosis not being confirmed ... ..	...	2	2	...	...	...	...	2	2
Number of Non-Pulmonary Cases transferred to Pulmonary group ... ..	...	...	...	...	...	...	...	...	...
Number of Cases remaining on the register at the end of the year	15	9	24	25	30	55	40	39	79

In Table XXVI. is given the monthly incidence of the cases of tuberculosis notified during 1935.

TABLE XXVI.
MONTHLY INCIDENCE OF TUBERCULOSIS
DURING THE YEAR 1935.

Month	Pulmonary			Non-Pulmonary			Total Pulmonary and Non-Pulmonary		
	Males	Females	Total	Males	Females	Total	Males	Females	Total
January	...	1	1	...	...	.	...	1	1
February	1	1	2	1	...	1	2	1	3
March	...	...	...	...	...	...	...	...	...
April	...	...	...	1	...	1	1	...	1
May	...	1	1	...	1	1	...	2	2
June	...	.	...	1	...	1	1	...	1
July	...	1	1	...	...	.	...	1	1
August	...	2	2	...	...	...	...	2	2
September	3	...	3	...	...	...	3	...	3
October	...	...	...	1	1	2	1	1	2
November	...	...	...	...	...	...	...	...	...
December	2	...	2	...	...	...	2	...	2
Totals	6	6	12	4	2	6	10	8	18

In the case of the six non-pulmonary notifications, the diagnoses were:—

	Males	Females
Tuberculous cervical glands	3	2
Tuberculosis of the kidney	1	—
	—	—
Totals	4	2
	—	—

Table XXVII gives the age groups of the cases of tuberculosis notified and of the deaths from the disease for the year 1935.

TABLE XXVII.

TUBERCULOSIS.

NEW CASES AND MORTALITY DURING 1935.

Age Periods	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	Males	Females	Males	Females	Males	Females	Males	Females
Years								
0-1	...	...	...	...	...	...	...	...
1-5	...	...	1	...	...	...	...	...
5-10	...	...	...	...	...	...	...	...
10-15	...	...	2	...	...	...	...	...
15-20	1	1	...	...	...	...	...	...
20-25	...	...	...	1	...	1	...	...
25-35	1	1	1	1	1	...	1	...
35-45	...	1	...	...	...	...	...	...
45-55	4	3	...	...	...	2	...	...
55-65	...	...	...	...	...	...	...	...
65 and upwards	...	...	...	...	...	...	...	...
	6	6	4	2	1	3	1	...
	12		6		4		1	

In no instance has there been any wilful neglect or refusal to notify, the notification of tuberculosis in this district being efficient and satisfactory.

There does not appear to be any excessive incidence of, or mortality from, tuberculosis in any particular occupation in the Area.

Table XXVIII below shows the cases notified and the deaths which have occurred during the ten years 1926-1935.

TABLE XXVIII.
TUBERCULOSIS.
NOTIFIED CASES AND MORTALITY, 1926-1935.

Year	Notified Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	Males	Females	Males	Females	Males	Females	Males	Females
1926	6	5	2	6	3	4	1	...
1927	5	3	3	1	3	2	3	1
1928	4	3	2	3	4	1	1	...
1929	2	4	7	8	2	3	3	2
1930	9	4	4	8	7	2	...	1
1931	8	4	5	8	7	4	1	2
1932	8	4	6	7	7	5	...	1
1933	10	3	3	7	3	2	1	2
1934	5	...	9	6	4	...	..	...
1935	6	6	4	2	1	3	1	...

It has not been necessary to take action during the year under the Public Health (Prevention of Tuberculosis) Regulations, 1925, relating to persons suffering from pulmonary tuberculosis employed in the milk trade, or under section 62 of the Public Health Act, 1925, relating to the compulsory removal to a hospital of persons suffering from tuberculosis.

Animal and Insect Pests.

In a few cases, advice has been given and poisons supplied for the suppression of rats and cockroaches.

Disinfection and Disinfestation.

No provision is made for the cleansing of verminous persons. Formalin lamps are used for the disinfection of rooms, whilst bedding and clothing are disinfected by passing them through a steam disinfecter.

Table XXIX shows particulars of disinfection during 1935.

TABLE XXIX.
DISINFECTION DURING 1935.

Disease	Number of Rooms	Number of Articles
Scarlet Fever ...	21	226
Tuberculosis ...	11	77
Diphtheria ...	4	61
Vermin, etc. ...	8	...
Total ...	44	364

(Number of houses—32).

In addition to the above, a number of library books has been fumigated, and a quantity of bedding and other articles destroyed.

Section G

Maternity and Child Welfare

Notification of Births Act, 1907.

During 1935, notification was received in respect of 178 live births and 4 still births, 164 being notified by Midwives and 18 by Medical Practitioners. Of these, 51 occurred in Moorlands Infirmary, Rawtenstall, and 18 in other hospitals or nursing homes outside the district. In the remaining 113 cases the mothers were confined in their own homes.

Midwives.

Five Midwives practise in the Area.

Health Visiting.

One Lady Health Visitor, who also acts as School Nurse, is employed by the Council. All newly born children are visited, the first visit being made to coincide with the final visit of the Midwife, except in cases where special treatment is required, when the Health Visitor attends as soon as she is notified.

All healthy children are ultimately referred to the Maternity and Child Welfare Centre, and it is recommended that they be seen periodically here until they commence school life. In all cases where circumstances require it, the Health Visitor visits the children at home.

During the year the following number of visits were paid :

(a) To children under one year of age :

First visits	...	...	149
Total visits	455

(b) To children between the ages of 1 and 5 years :

Total visits	166
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No Health Visitors are employed by Voluntary Associations.

Infant Welfare Centre.

The Maternity and Child Welfare Clinic meets fortnightly in the Methodist School, Manchester Road. Advice is given to mothers by the Medical Officer of Health on such matters as clothing or feeding, but, if in any case treatment is required, the mother is referred to her own doctor.

The following attendances were recorded during the year :—

(a) Total number of attendances at the Centre during the year :

(i) By children under one year of age 861

(ii) By children between the ages of 1 and 5 years ... 859

(b) Total number of children who first attended the Centre during the year and who, on the date of their first attendance, were :

(i) Under one year of age... .. 96

(ii) Between the ages of 1 and 5 years 4

(c) Total number of children under 5 years of age who attended at the Centre during the year and who, at the end of the year, were :

(i) Under one year of age... .. 84

(ii) Between the ages of 1 and 5 years 169

No Infant Welfare Centres are provided or maintained by Voluntary Associations.

Ante-Natal Centre.

So far it has not been possible to organise any ante-natal or post-natal clinic in the Borough. This is due to the fact that there is no accommodation provided to carry out the work. At the time of writing developments are expected in this work in the surrounding areas, and it is hoped that a scheme will be established in the near future

Maternity Homes and Hospitals.

There are no Maternity Homes or Hospitals situate within the Borough of Haslingden, but expectant mothers are admitted to Moorlands Infirmary, Rawtenstall, and to the following voluntary hospitals:—

- (1) St. Mary's Hospital, Manchester;
- (2) Maternity Dept., Bury Infirmary.

No payment is made to these hospitals by the Local Authority.

Supply of Food and Milk.

Where necessary, food and milk are supplied to expectant and nursing mothers and to infants on certificate of the Medical Officer of Health.

Children and Young Persons Acts.

The provisions of the Acts are advertised from time to time, and the Health Visitor visits any cases that may be on the register.

So far as could be ascertained only two children were being nursed for reward in the Borough at the end of the year.

Illegitimate Infants and Unmarried Mothers.

There is no institutional provision in the Area for illegitimate infants or unmarried mothers.

Maternal Mortality.

On receipt of notification each maternal death is reported to the County Medical Officer of Health, who makes the usual investigation and reports thereon to the Ministry of Health.

During 1935, one maternal death took place at St. Mary's Hospital, Manchester.

Puerperal Fever and Puerperal Pyrexia.

Under the Public Health (Puerperal Fever and Puerperal Pyrexia) Regulations, 1926, arrangements have been made by the Local Authority for the provision of the services of a Consultant, for the necessary bacteriological examinations and for the provision of hospital treatment, where these are asked for by the Medical Practitioner notifying the case. Nurses for such cases are not provided by the Council.

Two cases of puerperal pyrexia were notified during the year, one of which was seen by the Consultant appointed under the Regulations and removed to Hospital.

Ophthalmia Neonatorum.

Two notifications of ophthalmia neonatorum were received, the cases being visited and treated by the Lady Health Visitor. Particulars of the cases are given in Table XXX below.

TABLE XXX.

OPHTHALMIA NEONATORUM.

Cases			Vision Un- impaired	Vision Im- paired	Total Blind- ness	Deaths
Notified	Treated					
	At Home	In Hospital				
2	2	...	2	...	...	...

Orthopædic Treatment of Crippled Children.

Under the scheme adopted jointly with Rawtenstall and Bacup Corporations, children requiring advice or treatment for orthopædic defects are referred to the Orthopædic Clinic situated at Rawtenstall. The Clinic is held every Wednesday,

the Orthopædic Surgeon attending once monthly on the fourth Wednesday. Hospital treatment is available, where necessary, at Biddulph Grange Orthopædic Hospital.

Under this scheme, children from the elementary schools and the Maternity and Child Welfare Centre are dealt with, but as the work with regard to the former is reported upon in my Report as School Medical Officer, I am only giving particulars here regarding children under school age.

During 1935, four children in this category were referred to the Orthopædic Clinic, and the total number of attendances by these children was 21, of which 12 were at the ordinary clinic, and 9 when the surgeon was in attendance.

One of these children was removed to Biddulph Grange Orthopædic Hospital for institutional treatment.

Table XXXI shows particulars of the attendances at the Orthopædic Clinic during 1935.

TABLE XXXI.

LIST OF CHILDREN UNDER SCHOOL AGE WHO
ATTENDED THE ORTHOPÆDIC CLINIC DURING
1935.

Sex	Age	Diagnosis	Number of Attendances	
			Surgeon's Day	Ordinary Clinic
F	3	Genu valgum	2	2
F	1 $\frac{1}{4}$	Active Rickets ...	1	...
M	2	Infantile Paralysis ...	1	...
M	1	T. E. Varus, Right & Left	5	10

Appendix

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LOCAL LEGISLATION.

The following is a list of the local legislation in force within the Borough together with the dates of operation in each case:—

(a) Haslingden Corporation Acts and Orders—

Haslingden Corporation Act, 1906 (20th July, 1906).

Haslingden Corporation Act, 1924 (14th July, 1924).

Haslingden Corporation Act, 1929 (10th May, 1929).

Haslingden Electric Lighting Order, 1899 (13th July, 1899).

(b) Acts of Parliament Adopted by the Council—

Public Health Acts (Amendment) Act, 1890—

Parts I, II, III, IV and V (1st January, 1891).

Public Health Acts Amendment Act, 1907—

Sections 23, 31, 33, 43, 44, 50, 51, 56, 60, 61, 62, 63, 64, 65, 66, 67 and Part V subject to an amendment of Section 75 (14th January, 1915).

Sections 18, 24, 25, 26, 27, 34, 35, 36, 37, 38, 45, 49, 58, 59, 95 and Part VI, subject to amendments of Sections 27, 35 and 38 (28th September, 1931).

Public Health Act, 1925—

Parts II, III, IV and V (1st August, 1931).

Part VI (28th September, 1931).

Part IX (2nd May, 1934).

Baths and Washhouses Acts, 1846-1899 (2nd May, 1934).

Private Street Works Act, 1892 (1st January, 1893).

Infectious Disease (Prevention) Act, 1890 (1st April, 1892).

Public Libraries Acts, 1892-1919 (1st June, 1900).

Small Dwellings Acquisition Acts, 1899-1923 (24th March, 1909).

Note :

Housing (Rural Workers) Act, 1926—The Council of the Borough of Haslingden was declared to be the local authority for the purposes of this Act on the 16th May, 1927.

(c) Bye-Laws.

Bye-Laws are in force in respect of the following :—

Common Lodging-Houses, Slaughter-Houses, and the Decent Conduct of Persons using Sanitary Conveniences (28th September, 1899).

Management of the Cemetery (12th February, 1902).

Victoria Park (24th February, 1902).

Good Rule and Government (26th January, 1910).

Nuisances, Tents, Vans, Sheds and Similar Structures (30th June, 1915).

New Streets and Buildings (1st September, 1926).

Houses Let in Lodgings (19th April, 1927).

Pleasure Grounds (19th April, 1927)

Covered Market (17th February, 1933).

Public Library (19th September, 1933).

Regulating the Employment of Children (1st April, 1935).

